

Email:

## **Plan Review Application**

Environmental Health Services Section Food, Beverage and Lodging Plan Review

Bruce Jaster Director of Environmental Health Services 715 N 11<sup>th</sup> St #303, Moorhead, MN 56560

Fax:

(218) 299-7205

Phone: (218) 299-5220 (218) 299-7195

Plans must be submitted and <u>approved</u> before construction begins. <u>Allow at least 30 days at a minimum for plan Approval.</u>

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Check	One Below	Fee Schedule					
New Construction	Addition/Remodel	Please submit a check or money order payable to the Clay					
Type of Project (	(check all that apply)	County Treasurer.					
Food Service/Restaurant	Lodging/Hotel/Motel	Choose all that apply	Submit highest fee applicable:				
Pool/Spa (circle one or both)	Alcohol/Beverage Service	Choose un that apply					
Mobile Home Park	Camping	New Construction of –					
Catering	☐ Mobile Food Unit	Restaurant/food service					
Seasonal Permanent Food Stand	Food Cart	Hotels, motels, resorts or lodging	□ \$350.00				
Check A	ll That Apply	establishments with five or more sleeping units or remodel/addition of					
Private Sewer	☐ Municipal Service	five or more sleeping units to an existing					
Private Water	☐ Municipal Water	establishment.	or				
Seating Capacity 50 or less	50-175	School/daycare					
Establishment	Owner Information	New Construction of −  ☐ Seasonal permanent food stand	□ \$250.00				
Establishment Name:		☐ Mobile food unit ☐ Food cart	·				
Establishment Street Addre	ss:	☐ Hotel, motel, resort establishment of <i>less than five</i> sleeping units					
City/Zip:	County:	A restaurant with a Limited Food  Menu: prepackaged food that receives					
Establishment	Owner Information	heat treatment and is served in the package, continental breakfast, soft					
	Owner information	drinks, coffee, nonalcoholic beverages,					
Name:		dishwashing.					
Mailing Address (Include City,	State, Zip)						
		Remodel of –	□ \$250.00				
Phone:	Fax:	☐ An existing restaurant/food service	\$230.00				
		☐ Seasonal permanent food stand					
Email:		☐ ☐ Mobile food unit☐ Food cart					
		Hotel, motel, resort or lodging					
Establishment owner signa	ture:	establishment addition of less than five					
The sub-section above in disable above blood to	danakan difailan ka asalanik kha asasii ad	sleeping units  School/daycare					
information and fees will delay or stop	derstand failure to submit the required the plan review and licensure process. I						
understand that it is my responsibility information before licensure can be ob	to submit all required fees and necessary tained.	Proposed date for start of construction (no improcess):					
Submitto	r Information						
Subilitte	i illioilliatioli	Proposed date for completion of project (no in process):	-				
Name:		For Office Use Only:					
Mailing Address (include Cit	ty, State, Zip):	Date Received:	ın #				
		Check # Fee Received:					
Phone:	Fax:						

Please turn over and review other side of the plan review application

Plan review will not begin until this office receives all necessary information. To avoid delay of your food, beverage or lodging project, please include the following:							
	One set of plans (including plumbing, ventilation and make-up air [mechanical plans]);						
	A zoning permit or statement of approval from the local unit of government from the intended land use;						
Ιп	A proposed menu and floor plan indicating how food will be handled from the time it is received until served to						
	the consumer; describe type of alcohol service if available: please include Food Manager Certificate number;						
	A layout of the equipment and sinks;						
	Floor, wall, and ceiling finishes for kitchen, bar and storage areas;						
	Manufacturer specification sheets for all food service equipment;						
	Type of shelving to be used in the kitchen, walk-in cooler and freezer, and storage room; and						
	Location and construction of all toilet room, janitor's room, refuse storage room.						

#### **Additional Plan Submittal Information**

- Plumbing must be installed according to the Minnesota Plumbing Code. A separate bulletin covering the details of submitting plumbing plans is available. Please contact the Minnesota Department of Labor and Industry at 651-284-5067 for more plumbing plan review information. Minnesota Department of Labor and Industry, Construction Codes and Licensing Division, Engineering and Plumbing Unit, 443 Lafayette Road North, St. Paul, Minnesota 55155.
   A satisfactory plumbing inspection is necessary prior to licensing.
- 2. Plans must be submitted for any individual sewage treatment system to the local unit of government responsible for septic system inspections. This varies from county to county. An individual sewage treatment system must be designed by a licensed sewer designer and installed by a licensed sewer installer. If the establishment is on municipal sewer services, please indicate this fact. A certificate of compliance or a copy of an approved septic system permit from the local authority is required.
- 3. The water supply for the establishment must comply with the rules governing public water supplies and water wells. Provide the unique well number for private wells and the location of the well on the property. Please indicate if the establishment obtains water from a municipal supply. A well survey for private water supply is required prior to licensure.
- 4. You must submit a plan review application with the required fees and all the requested plans and information 30 days prior to beginning construction. After your plans have been reviewed, you will receive a letter indicating any changes that need to be made and any concerns that have been noted. Construction may start only after you receive a plan approval letter.
- 5. You will receive an application for licensure, which must be submitted with the appropriate fees before you can open. Finally, you must contact this office for an on-site inspection at least 10 business days prior to opening the establishment. (Minnesota Rules, part 4626.1750). If the inspection is satisfactory, and you have submitted a license application and all required fees, you will be permitted to open.

Note: An establishment is not allowed to open before an application for licensure is submitted and all required fees are paid (Minnesota Statutes, section 157.16).

Notice: The assurance of a dishonored check to this department will required a service charge of \$20 per check as in Minnesota Statutes, section 604.113, subd. 2 (a). Additional civil penalties may be imposed for nonpayment.



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## **EQUIPMENT SCHEDULE FORM**

Note: Please submit specification sheets for all equipment proposed, as this will help expedite the review/approval of plans.

Item #	Ougatites	Indicate New	heets for all equipment proposed, as this will help ex <b>Equipment</b>	Manufacturer	Model
(From Plan)	Quantity	Indicate New,	Equipment	ivianutacturer	Iviodei
	4	Used or Existing			61446
Example	1	New	Range	Cleveland	CM48



## Environmental Health Services Section Food and Beverage Plan Review 715 N 11 St # 303 Moorhead MN 56560

FRP - Fiberglass Reinforced Panel

QT - Quarry Tile

CT - Ceramic Tile

**VCT - Vinyl Composition Tile** 

SS - Stainless Steel

PT - Semi-Gloss Paint

#### **ROOM FINISH SCHEDULE**

	ROOM FINISH SCHEDULE  Base Walls  Calling										
Room	Room	Floor	Coving	Тор		Botto	m	Ceiling			Comments
No.	Name	Material	Material	Material	Finish	Material	Finish	Material	Finish	Height	